**FORM PTO-1083** MAIL STOP: RCE

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22314-1450

Docket No.: 200.1079CON4 Date: June 11, 2007

In re application of:

Ronald M. BURCH, et al.

Serial No.: Filed:

10/056,348 January 25, 2002

For:

ANALGESIC COMBINATION OF OXYCODONE AND NABUMETONE

## Sir:

Transmitted herewith is a Amendment (19 pages) in the above-identified application.

- Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
- Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27. []
- No fee for additional claims is required. [X]
- A filing fee for additional claims calculated as shown below, is required: []

|   | (Col. 1)  | (Col. 2)   |         |
|---|-----------|------------|---------|
| FOR:  | REMAINING | HIGHEST    |         |
|   | AFTER     | PREVIOUSLY | PRESENT |
|   | AMENDMENT | PAID FOR   | EXTRA   |
| ITOTAL CLAIMS                                   | Minus     | =          | 0       |
| [INDEP. CLAIMS]                                 | Minus     | =          | 0 [     |
| If 1 FIRST PRESENTATION OF MULTIPLE DEP. CLAIM! |           |            |         |

| SMALL ENTITY   RATE   FEE   OR | LARGE ENTITY   RATE   FEE |
|--------------------------------|---------------------------|
| x \$ 9 \$                      | x \$ 18 \$                |
| x \$ 42 \$                     |                           |
| 1+ \$180 \$                    | 1 1+ \$3601\$00.00        |

TOTAL: \$ OR TOTAL: \$00.00

- If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
- Also transmitted herewith are: [X]
  - [X] Petition for three (3) month extension under 37 C.F.R. 1.136
  - [X] Other: Request for Continued Examination (1 page)
  - [X] Other: Exhibit A (1 page)
- Check(s) in the amount of \$1,810.00 is/are attached to cover: [X]
  - [X] Petition for three (3) month extension under 37 C.F.R. 1.136
  - [X] Other: Request for Continued Examination
- [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.
  - [X] Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
  - Any patent application processing fees under 37 C.F.R. 1.17.

Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, [X] and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR

1.136.

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I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with sufficient postage to the United States Postal Service as "first class mail" in an envelope addressed to "Mail Stop: RCE; Commissioner for Patents, Alexandria, VA 22314-1450" on June 11, 2007.

DAVIDSON, DAVIDSON & KAPREL, LLC